A GUIDE TO TREATMENT



TARGETED OUTREACH

A Guide to Treatment: How to Help People Affected by Substance Use Disorders

Real people...

Addiction affects millions of people every year, with 69 percent of Americans reporting that they know someone who struggles with alcohol or drugs.¹ In 2006, 22.6 million people aged 12 or older were living with a substance use disorder in the past year, making it more common than coronary heart disease.^{2,3}

A substance use disorder means that a person is dependent on or abuses alcohol and/or drugs, including the nonmedical use of prescription drugs.⁴ Fortunately, many people find refuge in treatment and long-term recovery. In 2006, 4 million people aged 12 or older received some form of treatment, ranging from residential and outpatient programs to self-help groups.⁵ Similar to other chronic disorders, substance use disorders are medical conditions that can be treated, and more importantly, for which recovery is possible.⁶

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), successful treatment can encourage people to go to drug and alcohol counseling and group meetings, avoid the people, places, and situations that trigger trouble, work with a counselor to show a commitment to change, and learn anger management and job skills to open more choices in life.⁷ Many different treatment options exist, which is important because substance use disorders affect people from all walks of life and do not discriminate based on age, race, gender, ethnicity, class, or employment status.⁸

To receive the most effective and comprehensive treatment, it is essential that people with substance use disorders, together with their providers, identify the most appropriate course of treatment for them and their families. Effective treatment depends on a variety of factors; treatment must take into account a person's cultural background, other health conditions, family and work responsibilities, and the specific substances to which a person is addicted. According to SAMHSA, in 2006, 83 percent of treatment facilities offered at least one special program or group for certain client types.

The following sections describe different types and levels of treatment available. This is not an all-inclusive list; it focuses on groups with specific needs that may require particular attention in treatment. While certain treatment options are not necessarily the best for everyone, the specific types that follow have proven successful for many.

Adolescents

Teens begin using alcohol and drugs for different reasons than adults. For example, peer pressure may affect adolescents more than other age groups. Adolescent substance use impairs their cognitive, physical, and emotional development.¹² In addition to gender and race issues—such as culture and heritage that need to be factored into treatment—physical and mental developmental issues, other disorders, and diverse value sets also need to be considered when treating youths with substance use disorders.¹³

Treatment for young people addicted to alcohol and/or drugs must tackle each aspect of their experiences. For many adolescents, the root of a substance use disorder is in the home; therefore, programs should attempt to involve family members and address addiction or other related issues in the home. Families often hold the key to changing a youth's environment and making it more conducive to recovery.¹⁴

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Taking these considerations into account will help make treatment for adolescents more effective. One treatment study researched adolescent, community-based programs that addressed peer relationships, educational concerns, and family issues such as parent-child relationships and parental substance abuse. This form of programming saw a decrease in drinking, illicit drug use, and criminal involvement among those who obtained treatment in this setting—in addition to improved school performance and self esteem and fewer thoughts of suicide.^{15, 16}

Older adults

Older adults are particularly at risk for prescription drug abuse, even inadvertently. People aged 65 and older consume one-third of all medications taken and are more likely to be prescribed long-term and multiple prescriptions, which could lead to unintentional misuse. Because older adults are more vulnerable to a medicine's effects due to changes in drug metabolism with age, this type of dependence can be particularly dangerous.¹⁷

Through treatment and recovery, many older adults will have better physical and mental health and will be less likely to encounter illness and disability. Unfortunately, treatment programs specifically designed for older adults are not widespread—only 7 percent of facilities report having a special program or group designed specifically for seniors. However, even in a general treatment program, older adults with substance use disorders have responded well to age-specific, supportive, and non-confrontational group treatment that aims to build or rebuild self esteem. ²⁰

People with co-occurring substance use and mental health disorders

Many times, people with substance use disorders have co-occurring serious psychological distress, also known as mental health disorders, such as anxiety or mood disorders.²¹ In 2006, more than 22 percent of those 18 or older with serious psychological distress also were dependent on or abused alcohol and/or drugs.²² People suffering from both substance use and mental health disorders are said to have co-occurring disorders.

Ensuring that treatment is available and accessible in a collaborated treatment process for both disorders is essential to providing a successful path of recovery. The treatment of both mental health and substance use disorders can help prevent the exacerbation of other health problems, including cardiac and pulmonary diseases, according to SAMHSA's *Report to Congress on the Prevention and Treatment of Co-Occurring Substance Abuse Disorders and Mental Health Disorders*.²³

Employees

Many people with substance use disorders are employed. In 2006, 61.5 percent of adults with a substance use disorder also were employed full time—translating into nearly 13 million people.²⁴ Many companies are supportive of treatment. An overwhelming majority of human resources professionals (92 percent) agree that an effective treatment program increases employee productivity.²⁵

In fact, treatment can make a truly significant difference in the workplace. Reported job problems, including incomplete work, absenteeism, tardiness, work-related injuries, mistakes, and disagreements with supervisors, are cut by an average of 75 percent among employees who have received treatment for substance use disorders.²⁶



Since a large number of people with substance use disorders are employed full time, many treatment programs take this under consideration. Employees seeking treatment often can do so without interfering with their ability to perform their jobs. Intensive outpatient programs are effective and allow people to continue to work, while seeking treatment outside of work.²⁷ Additionally, many companies offer employee assistance programs, which can help workers find a suitable treatment and recovery support program and provide confidential problem identification, short-term counseling, and follow-up services to help resolve the problem.²⁸

Treatment and recovery options

There is a wide range of treatment options available today. The following chart outlines some of the common avenues people may take as part of their treatment and recovery process.

Medical Detoxification	Administered under the care of a physician who helps manage physical withdrawal symptoms, detoxification is a set of interventions aimed at managing a person's safe withdrawal from a substance. Detoxification alone does not lead to lasting abstinence, since it does not address the psychological and behavioral facets of addiction. ²⁹
Inpatient Programs and Therapeutic Communities	Inpatient treatment is a type of program where people stay overnight at a hospital or treatment facility, for a few days to several months, to participate in rehabilitation and recovery. ³⁰ Programs can be short or long term, lasting 3 to 6 weeks or many months. This type of treatment is often followed by extended participation in outpatient therapy (e.g., 12-step programs). ^{31, 32} Some programs, like therapeutic communities, are long term, more structured, and focused on people with a long history of addiction. ³³
Outpatient Programs	These are programs where people live at home and receive treatment services during the day. ³⁴ Outpatient treatment can be offered in health clinics, community mental health clinics, counselors' offices, hospital clinics, local health department offices, or at inpatient programs with outpatient clinics. ³⁵
Medical Maintenance Programs	This involves the use of medications, such as buprenorphine or naltrexone, as a component of treatment for addiction to opioids and alcohol, respectively. ^{36, 37} Medication, such as methadone treatment, is used to help wean patients off of their dependency. ³⁸ More information can be found at www.dpt.samhsa.gov.





Therapy, Counseling, and Support Groups	Individual and/or group counseling and other behavioral therapies are essential components of effective long-term treatment. Therapy confronts issues of motivation, builds skills to resist substance use, replaces destructive activities with constructive behavior, and improves problem-solving abilities, as well as facilitates interpersonal relationships. ³⁹
Ongoing Support and Aftercare	Participation in mutual support groups during and following treatment is often helpful in sustaining recovery.40

For confidential information and treatment referral, please call SAMHSA's National Helpline at 1-800-662-HELP or visit SAMHSA's Substance Abuse Treatment Facility Locator at www.findtreatment.samhsa.gov. For more information and materials about substance use disorders, treatment, and recovery, visit SAMHSA's Center for Substance Abuse Treatment's Web site at www.csat.samhsa.gov. Additional information is available at www.recoverymonth.gov.



SOURCES

- 1 What Does America Think About Addiction Prevention and Treatment? Princeton, NJ: Robert Wood Johnson Foundation, 24, March 2007, p. 1.
- 2 Results from the 2006 National Survey on Drug Use and Health: National Findings. DHHS Publication No. (SMA) 07-4293. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies, September 2007, p. 69.
- 3 "Cardiovascular Disease Statistics." American Heart Association Web site: www.americanheart.org/presenter.jhtml?identifier=4478. Accessed July 26, 2007.
- 4 Results from the 2006 National Survey on Drug Use and Health: National Findings, p. 69.
- 5 Ibid, pp. 74, 75.
- 6 Pathways of Addiction: Opportunities in Drug Abuse Research. National Academy Press. Washington, D.C.: Institute of Medicine, 1996.
- 7 Alcohol and Drug Treatment: How it Works and How it Can Help You. DHHS Publication No. (SMA) 07-4292. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment, 2007, p. 3.
- 8 Results from the 2006 National Survey on Drug Use and Health: National Findings, pp. 23, 71-74.
- 9 Principles of Drug Addiction Treatment: A Research-Based Guide. NIH Publication No. 99-4180. Bethesda, MD: U.S. Department of Health and Human Services, National Institutes of Health, National Institute on Drug Abuse, October 1999, p. 3.
- 10 Ibid.
- National Survey of Substance Abuse Treatment Services (N-SSATS): 2006 Data on Substance Abuse Treatment Facilities. DHHS Publication No. (SMA) 06-4296. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies, October 2007, p. 37.
- 12 Treatment Improvement Protocol (TIP) Series 32: Treatment of Adolescents with Substance Use Disorders. DHHS Publication No. (SMA) 99-3283. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment, 1999, section entitled "Executive Summary and Recommendations."
- 13 Ibid.
- 14 Ibid
- Martin, K. Adolescent Treatment Programs Reduce Drug Abuse, Produce Other Improvements. NIDA Notes Volume 17, Number 1, April 2002. NIDA Web site: www.nida.nih.gov/NIDA_Notes/NNVol17N1/Adolescent.html. Accessed September 26, 2007.
- Hser, Y., Grella, C., Hsieh, S., Anglin, M.D. "An evaluation of drug treatment for adolescents in four U.S. cities." *Archives of General Psychiatry*, 58, July 2001, pp. 689-695.
- 17 "Prescription Drugs: Abuse and Addiction." *National Institute on Drug Abuse Research and Report Series*. Publication Number: 01-4881. Bethesda, MD: U.S. Department of Health and Human Services, National Institutes of Health, July 2001, pp. 5, 6.
- 18 "Substance Abuse and Misuse Among Older Adults." Geriatric Mental Health Foundation Web site: www.gmhfonline.org/gmhf/consumer/factsheets/substnabuse factsheet.html. Accessed September 18, 2007.
- National Survey of Substance Abuse Treatment Services (N-SSATS): 2006 Data on Substance Abuse Treatment Facilities. DHHS Publication No. (SMA) 06-4296. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies, October 2007, p. 37.
- "Clinical Guidelines for Alcohol Use Disorders in Older Adults." The American Geriatrics Society Web site, November 2003: www.americangeriatrics.org/products/positionpapers/alcoholPF.shtml, section entitled "Features of preferred treatment options for abuse/dependence among older adults." Accessed September 18, 2007.
- 21 Results from the 2006 National Survey on Drug Use and Health: National Findings, p. 83.
- 22 Ibid, p. 85.
- 23 Report to Congress on the Prevention and Treatment of Co-occurring Substance Abuse Disorders and Mental Health Disorders. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, 2002, p. ix.
- 24 Results from the 2006 National Survey on Drug Use and Health: National Findings, p. 74.
- "Hazelden Foundation survey reveals disparity between severity of problem and employer assistance." Hazelden Web site: web/public/2007workplacesurvey.page. Accessed September 18, 2007.
- 26 Comprehensive Assessment and Treatment Outcome Research. St. Paul, MN: CATOR Connection, 1990.
- 27 Chalk, Mary Beth. Telephone Substance Abuse Treatment: The Next Generation of Care, pp. 17, 18.
- 28 U.S. Department of Labor Web site: www.dol.gov/asp/programs/drugs/workingpartners/dfworkplace/ea.asp, section entitled "Employee Assistance," summary of p. 1. Accessed September 18, 2007.
- 29 Treatment Improvement Protocol (TIP) Series 45: Detoxification and Substance Abuse Treatment. DHHS Publication No. (SMA) 06-4131.
 Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment, 2006, pp. xv, 4.
- 30 "Inpatient Treatment." Partnership for a Drug-Free America Web site: www.drugfree.org/Intervention/Glossary/Inpatient_Treatment. Accessed January 2, 2008.
- "Drug Abuse and Addiction: Rehab, Self-Help and Treatment Options." The Helpguide Web site: www.helpguide.org/mental/drug_abuse_addiction_rehab_treatment.htm. Accessed September 26, 2007.
- 32 Treatment Methods for Drug Addiction. Connecticut Clearinghouse, A Program of the Wheeler Clinic by the Department of Mental Health & Addiction Services, July 2004. Connecticut Clearinghouse Web site: www.ctclearinghouse.org/topics/customer-files/Treatment-Methods-for-Drug-Addiction.pdf. Accessed September 26, 2007.
- 33 Ibid.

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- "Outpatient Treatment." Partnership for a Drug-Free America Web site: www.drugfree.org/Intervention/Glossary/Outpatient_Treatment.

 Accessed January 2, 2008.
- What is Substance Abuse Treatment? A Booklet for Families. DHHS Publication No. (SMA) 04-3955. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment, 2004. pp 9, 10, 11.
- 36 Treatment Improvement Protocol (TIP) Series 40: Clinical Guidelines for the Use of Buprenorphine in the Treatment of Opioid Addiction. DHHS Publication No. (SMA) 04-3939. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment, 2004, pp. 51, 58-59.
- 37 Treatment Improvement Protocol (TIP) Series 28: Naltrexone and Alcoholism Treatment. DHHS Publication No. (SMA) 98-3206. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment, 1998, Executive Summary.
- 38 "Drug Abuse and Addiction: Rehab, Self-Help and Treatment Options." The Helpguide Web site: www.helpguide.org/mental/drug_abuse_addiction rehab treatment.htm. Accessed September 26, 2007.
- 39 Principles of Drug Addiction Treatment: A Research-Based Guide, p. 4.
- 40 Ibid, p. 5.